



MISSOURI DEPARTMENT OF NATURAL RESOURCES
DAM AND RESERVOIR SAFETY
APPLICATION FOR CONSTRUCTION PERMIT

DATE

PART I - GENERAL INFORMATION

OWNER(S) NAME

ADDRESS

CITY

STATE

ZIP CODE

TELEPHONE NUMBER (REQUIRED)

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NAME OF DAM

ID NUMBER

MO

COUNTY

LOCATION OF DAM AT CENTERLINE AT MAXIMUM SECTION

SECTION , TOWNSHIP NORTH, RANGE E/W

APPROXIMATE UTM COORDINATES

N

E

DAM HEIGHT

RESERVOIR AREA

OWNER'S ENGINEER

REG. NUMBER

ADDRESS

CITY

STATE

ZIP CODE

TELEPHONE NUMBER (REQUIRED)

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ATTACHED DOCUMENTS (NOTE: THIS APPLICATION IS NOT COMPLETE WITHOUT ADDRESSING PART II.)

PART II - DESIGN REPORT CONSIDERATIONS*

PART III - CONSTRUCTION DOCUMENTS*

SUBMIT TO: Department of Natural Resources
Geological Survey and Resource Assessment Division
Dam and Reservoir Safety
P.O. Box 250
Rolla, Missouri 65402
(573) 368-2175

* SEE RULES AND REGULATIONS FOR CLARIFICATION